Image# 14950017732

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

| Schedule E) | FOR SE OF FORM 24/48 | | | | |
|---|---|--|--|--|--|
| NAME OF COMMITTEE (In Full) | FEC IDENTIFICATION NUMBER ▼ | | | | |
| National Rifle Association of America Political Victory Fund | | | | | |
| | C C00053553 | | | | |
| Check if 24-hour report 48-hour report New report Amends report filed on | | | | | |
| Full Name of Payee | Date of Public Distribution/Dissemination | | | | |
| National Rifle Association of America | M M / D D / Y Y Y Y | | | | |
| Mailing Address 11250 Waples Mill Road | 08 14 2014 | | | | |
| 11250 Wapies Will Road | Amount | | | | |
| City State Zip Code | 3865.41 | | | | |
| Fairfax VA 22030 | Transaction ID : 61235246 | | | | |
| | Date of Disbursement or Obligation | | | | |
| Purpose of Expenditure Salary / Benefits Category/ Type 001 | M M / D D / Y Y Y Y | | | | |
| Name of Federal Candidate Support Office | ce Sought: House District: | | | | |
| Thom Tillis Oppose | President State: NC | | | | |
| Calendar Year-To-Date Disl | pursement For: Primary X General | | | | |
| Per Election for Office Sought 0.00 201 | | | | | |
| Full Name of Payee | Date of Public Distribution/Dissemination | | | | |
| National Rifle Association of America | M = M / D = D / Y = Y = Y | | | | |
| Mailing Address 11250 Waples Mill Road | 08 14 2014 | | | | |
| 1 1230 Wapies Willi Road | Amount | | | | |
| City State Zip Code | 1218.01 | | | | |
| Fairfax VA 22030 | Transaction ID: 61235248 | | | | |
| Purpose of Expenditure | Date of Disbursement or Obligation | | | | |
| Salary / Benefits Category/ Type 001 | M = W / B = B / T = T = T | | | | |
| Name of Federal Candidate Support Offi | ce Sought: X House District: 14 | | | | |
| David Joyce Support Offi | | | | | |
| | Fresident Senate State. | | | | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 Dis 201 | bursement For: Primary | | | | |
| | | | | | |
| (a) SUBTOTAL of Itemized Independent Expenditures | 5083.42 | | | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | | | |
| (c) col 10 11 c c c c c c c c c c c c c c c c c | 7 7 | | | | |
| (c) TOTAL Independent Expenditures | | | | | |
| | 7 7 7 | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | | |
| Mary Rose Adkins | M / D D / Y Y Y Y | | | | |
| [Electronically Filed] Date | 08 14 2014 | | | | |
| Oignature | | | | | |

FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ National Rifle Association of America Political Victory Fund C00053553 Check if 24-hour report X New report 48-hour report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination National Rifle Association of America 80 2014 14 Mailing Address 11250 Waples Mill Road Amount City State Zip Code 1096.47 Transaction ID: 61235249 VA 22030 Fairfax Date of Disbursement or Obligation Purpose of Expenditure Category/ Salary / Benefits 001 Type Name of Federal Candidate Office Sought: 06 X Support X House District: Ryan Costello PΑ Oppose President Senate State: Disbursement For: Primary X General Calendar Year-To-Date 0.00 2014 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination National Rifle Association of America 08 2014 Mailing Address 11250 Waples Mill Road Amount City State Zip Code 2641.05 VA 22030 Transaction ID: 61235252 Fairfax Date of Disbursement or Obligation Purpose of Expenditure Category/ 001 Salary / Benefits Type Name of Federal Candidate **X** Support Office Sought: House District: Sen. Mitch McConnell KY Oppose Senate President State: **X** General Primary Calendar Year-To-Date Disbursement For: 0.00 2014 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 3737.52 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Mary Rose Adkins [Electronically Filed] 08 2014 Date Signature

PAGE

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| Schedule E) | | TOTILO | | PAGE 3 OF 6 FOR SE OF FORM 24/48 |
|---|--|-------------------|--------------------|--|
| NAME OF COMMITTEE (In Full) National Rifle Association of America Po | FEC IDENTIFICATION NUMBER ▼ C C00053553 | | | |
| Check if 24-hour report 48-hour report | X New repo | ort Amends | report filed | I on Mam / Dad / Yayayay |
| Full Name of Payee National Rifle Association of America | | | | Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Mailing Address 11250 Waples Mill Road | | | | Amount |
| | tate VA | Zip Code 22030 | | 668.61 Transaction ID : 61235254 Date of Disbursement or Obligation |
| Purpose of Expenditure Salary / Benefits | | Category/ Type | 001 | M M / D D / Y Y Y Y |
| Name of Federal Candidate Daniel Benishek M.D. | | Support Oppose | | e Sought: |
| Calendar Year-To-Date Per Election for Office Sought | | 0.00 | Disb 2014 | ursement For: |
| Full Name of Payee National Rifle Association of America Mailing Address 11250 Waples Mill Road | | | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| ' | tate VA | Zip Code 22030 | | Transaction ID : 61235256 Date of Disbursement or Obligation |
| Purpose of Expenditure Salary / Benefits | | Category/ Type | 001 | M = M / D = D / Y = Y = Y |
| Name of Federal Candidate David Valadao | | Suppo Oppos | | e Sought: House District: 21 President Senate State: CA |
| Calendar Year-To-Date Per Election for Office Sought | | 0.00 | Disb 2014 | ursement For: |
| (a) SUBTOTAL of Itemized Independent Expenditures | | | ······ > | 1553.43 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | s | | ······ > | |
| (c) TOTAL Independent Expenditures | | | ······ > | |
| Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate coparty committee) any political party committee or its age | or authorized | | | |
| Mary Rose Adkins Signature | [Electroni | ically Filed] [| | 08 / DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |

| | ,, , | FOR SE OF FORM 24/48 | | | |
|---|---|---|--|--|--|
| | ME OF COMMITTEE (In Full) ational Rifle Association of America Political Victory Fund | FEC IDENTIFICATION NUMBER ▼ | | | |
| | | C C00053553 | | | |
| Ch | eck if X 24-hour report 48-hour report New report Amends report file | d on Mam / Dab / Yayayay | | | |
| П | Full Name of Payee | Date of Public Distribution/Dissemination | | | |
| | National Rifle Association of America | 08 14 2014 | | | |
| | Mailing Address 11250 Waples Mill Road | Amount | | | |
| | City State Zip Code | 884.82 | | | |
| | Fairfax VA 22030 | Transaction ID : 61235260 Date of Disbursement or Obligation | | | |
| | Purpose of Expenditure Salary / Benefits Category/ Type 001 | M M | | | |
| | Name of Federal Candidate Support Office | ce Sought: X House District: 08 | | | |
| | Stewart Mills Oppose | President Senate State: MN | | | |
| | Calendar Year-To-Date Per Election for Office Sought Disl 201 | oursement For: | | | |
| | Full Name of Payee | Date of Public Distribution/Dissemination | | | |
| | National Rifle Association of America | 08 14 2014 | | | |
| | Mailing Address 11250 Waples Mill Road | Amount | | | |
| 1 | City State Zip Code | 552.62 | | | |
| | Fairfax VA 22030 | Transaction ID : 61235261 Date of Disbursement or Obligation | | | |
| | Purpose of Expenditure Salary / Benefits Category/ Type 001 | M M / D D / Y Y Y Y | | | |
| 1 | Name of Federal Candidate Support Offi | ce Sought: X House District: 06 | | | |
| | Mr. Michael Coffman Oppose | President Senate State: CO | | | |
| | Calendar Year-To-Date Per Election for Office Sought Dis 201 | bursement For: | | | |
| (a) SUBTOTAL of Itemized Independent Expenditures | | | | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | | | |
| | (c) TOTAL Independent Expenditures | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | | |
| | Mary Rose Adkins [Electronically Filed] Date | 08 14 2014 | | | |
| | Signature | | | | |

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| | | FOR SE OF FORM 24/48 | | | |
|---|---|---|--|--|--|
| | ME OF COMMITTEE (In Full) ational Rifle Association of America Political Victory Fund | FEC IDENTIFICATION NUMBER ▼ C C00053553 | | | |
| | | C 00003333 | | | |
| Check if 24-hour report 48-hour report New report Amends report filed on | | | | | |
| Т | Full Name of Payee | Date of Public Distribution/Dissemination | | | |
| | National Rifle Association of America | 08 / 14 / 2014 | | | |
| ١ | Mailing Address 11250 Waples Mill Road | Amount | | | |
| ı | City State Zip Code | 1762.19 | | | |
| | Fairfax VA 22030 | Transaction ID : 61235264 Date of Disbursement or Obligation | | | |
| | Purpose of Expenditure Salary / Benefits Category/ Type 001 | M = M / D = D / Y = Y = Y = Y | | | |
| | Name of Federal Candidate Support Office | ce Sought: X House District: 10 | | | |
| | Barbara Comstock Oppose | President Senate State: VA | | | |
| | Calendar Year-To-Date Per Election for Office Sought Disl 201 | oursement For: Primary General Other (specify) ▶ | | | |
| ŀ | Full Name of Payee | Date of Public Distribution/Dissemination | | | |
| ١ | National Rifle Association of America | 08 14 2014 | | | |
| | Mailing Address 11250 Waples Mill Road | Amount | | | |
| | City State Zip Code | 891.34 | | | |
| ١ | Fairfax VA 22030 | Transaction ID : 61235265 Date of Disbursement or Obligation | | | |
| | Purpose of Expenditure Salary / Benefits Category/ Type 001 | M M / D D / Y Y Y Y | | | |
| ١ | Name of Federal Candidate Support Offi | ce Sought: House District: 02 | | | |
| | William Southerland II Oppose | President Senate State: FL | | | |
| | Calendar Year-To-Date Per Election for Office Sought Dis 201 | bursement For: X Primary General 4 Other (specify) ▶ | | | |
| (a) SUBTOTAL of Itemized Independent Expenditures | | | | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | | | |
| (| (c) TOTAL Independent Expenditures | | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | | |
| | Mary Rose Adkins [Electronically Filed] Date | 08 14 2014 | | | |
| | Signature | | | | |

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| ooneddic Ly | | FOR SE OF FORM 24/48 | | | |
|---|-----------------------------|--|--|--|--|
| NAME OF COMMITTEE (In Full) National Rifle Association of America Political Victory Fu | FEC IDENTIFICATION NUMBER ▼ | | | | |
| Transmar time rissociation of runemour control violety in | | C C00053553 | | | |
| Check if 24-hour report 48-hour report New report A | mends report filed on | M / D D / Y = Y = Y | | | |
| Full Name of Payee National Rifle Association of America | Date of | of Public Distribution/Dissemination | | | |
| | | 08 14 2014 | | | |
| Mailing Address 11250 Waples Mill Road | Amour | nt | | | |
| City State Zip Code | | 1154.83 | | | |
| Fairfax VA 22030 | | Transaction ID: 61235266 Date of Disbursement or Obligation | | | |
| Purpose of Expenditure Salary / Benefits Category Typ | / 001 | M / D D / Y Y Y Y | | | |
| Name of Federal Candidate | Support Office Sought | t: House District: | | | |
| Sen. Mary Landrieu | Oppose Preside | ent Senate State: LA | | | |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement 2014 | | | | |
| | | ther (specify) - | | | |
| Full Name of Payee National Rifle Association of America | | of Public Distribution/Dissemination 08 14 2014 | | | |
| Mailing Address 11250 Waples Mill Road | Amou | | | | |
| City State Zip Code | | 923.86 | | | |
| Fairfax VA 22030 | | oction ID : 61235267 of Disbursement or Obligation | | | |
| Purpose of Expenditure Salary / Benefits Category Typ | / 001 M | M / D D / Y Y Y Y | | | |
| Name of Federal Candidate | Support Office Sough | t: House District: | | | |
| Joni Ernst | Oppose Preside | ent Senate State: IA | | | |
| Calendar Year-To-Date Per Election for Office Sought | Disbursement 2014 O | t For: Primary X General | | | |
| (a) SUBTOTAL of Itemized Independent Expenditures | | 2078.69 | | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | | | |
| (c) TOTAL Independent Expenditures | ······ | 16544.03 | | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | | |
| Mary Rose Adkins [Electronically Filed] | Date 08 | 14 2014 | | | |
| Signature | | | | | |

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